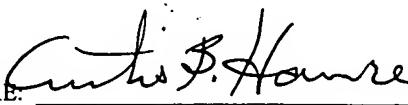


U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE		ATTORNEY'S DOCKET NUMBER
FORM PTO-1390 (REV 10-94)		9983.144USWO
TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371		U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5)
		Unknown 10/520651
INTERNATIONAL APPLICATION NO.	INTERNATIONAL FILING DATE	PRIORITY DATE CLAIMED
PCT/KR2004/001602	30 June 2004	30 June 2003
TITLE OF INVENTION		
POINTING DEVICE HAVING FINGERPRINT IMAGE RECOGNITION FUNCTION, FINGERPRINT IMAGE RECOGNITION AND POINTING METHOD, AND METHOD FOR PROVIDING PORTABLE TERMINAL SERVICE USING THEREOF		
APPLICANT(S) FOR DO/EO/US		
Sung Chul JUH		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
<p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(l).</p> <p>4. <input type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date.</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau). b. <input checked="" type="checkbox"/> has been transmitted by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US) </p> <p>6. <input type="checkbox"/> A translation of the International Application into English (35 U.S.C. 371(c)(2)).</p> <p>7. <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) <ul style="list-style-type: none"> a. <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau). b. <input type="checkbox"/> have been transmitted by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input checked="" type="checkbox"/> have not been made and will not be made. </p> <p>8. <input type="checkbox"/> A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).</p> <p>10. <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).</p>		
Items 11. to 16. below concern document(s) or information included:		
<p>11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input checked="" type="checkbox"/> A FIRST preliminary amendment. <input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment.</p> <p>14. <input type="checkbox"/> A substitute specification.</p> <p>15. <input type="checkbox"/> A change of power of attorney and/or address letter.</p> <p>16. <input checked="" type="checkbox"/> Other items or information: Application Data Sheet, Communication Under 37 CFR 1.32(c)(3), International Publication Page, PCT Request, Form PCT/ISA/210</p>		

U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5) Unknown 10/520651		INTERNATIONAL APPLICATION NO. PCT/KR2004/001602	ATTORNEY'S DOCKET NUMBER 9983.144USWO
BASIC NATIONAL FEE (37 CFR 1.492(a) (1)-(5)):			
[X] a) Basic National fee.....		\$300.00	
[X] b) Examination fee.....		\$200.00	
[X] c) Search fee.....		\$500.00	
TOTAL OF ABOVE CALCULATIONS =		\$1000.00	
Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	Rate
-100 =	/50 =		X \$250.00
Surcharge of \$130.00 for furnishing the oath or declaration later than [] 20 [] 30 months from the earliest claimed priority date (37 CFR 1.492(e)).		\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE
Total claims	53	-20 = 33	X \$50.00
Independent claims	6	-3 = 3	X \$200.00
MULTIPLE DEPENDENT CLAIM(S) (if applicable)		+ \$360.00	
TOTAL OF ABOVE CALCULATIONS =		\$3250.00	
Reduction by 1/2 for filing by small entity, if applicable. Small entity status is claimed pursuant to 37 CFR 1.27		\$1625.00	
SUBTOTAL =		\$1625.00	
Processing fee of \$130.00 for furnishing the English translation later than [] 20 [] 30 months from the earliest claimed priority date (37 CFR 1.492(f)).		+ \$	
TOTAL NATIONAL FEE =		\$1625.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property		+ \$40.00	
TOTAL FEES ENCLOSED =		\$1665.00	
		Amount to be: refunded	\$
		charged	\$
<p>a. <input checked="" type="checkbox"/> Check(s) in the amount of <u>\$1625</u> and <u>\$40</u> to cover the above fees is enclosed.</p> <p>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>13-2725</u>.</p>			
<p>NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.</p>			
SEND ALL CORRESPONDENCE TO: Curtis B. Hamre MERCHANT & GOULD P.O. Box 2903 Minneapolis, MN 55402-0903		<p>SIGNATURE: <u></u></p> <p>NAME: Curtis B. Hamre</p> <p>REGISTRATION NUMBER: 29,165</p>	

10/520651

DT12 Rec'd PCT/PTO 07 JAN 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

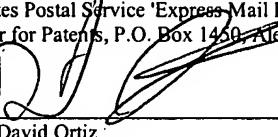
Applicant: JUH
 Docket: 9983.144USWO
 Title: POINTING DEVICE HAVING FINGERPRINT IMAGE RECOGNITION FUNCTION,
 FINGERPRINT IMAGE RECOGNITION AND POINTING METHOD, AND METHOD FOR
 PROVIDING PORTABLE TERMINAL SERVICE USING THEREOF

CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number: EV 495871235 US

Date of Deposit: January 7, 2005

I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By: 
 Name: David Ortiz

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

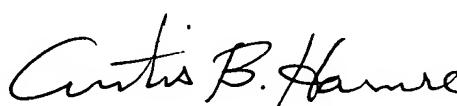
We are transmitting herewith the attached:

- Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- National Stage PCT Patent Application: Spec. 40 pgs; 53 claims; Abstract 1 pgs.
 The fee has been calculated as shown below in the 'Claims as Filed' table.
- 20 sheets of formal drawings
- Small entity status is claimed pursuant to 37 CFR 1.27
- A signed Combined Declaration and Power of Attorney
- Assignment of the invention to MOBISOL, Recordation Form Cover Sheet
- A check in the amount of \$1625.00 to cover the Filing Fee
- A check for \$40.00 to cover the Assignment Recording Fee.
- Application Data Sheet, 3 pages.
- Other: Form PTO-1390, Communication Under 37 CFR 1.32(c)(3), Preliminary Amendment, International Publication Page, PCT Request, Form PCT/ISA/210
- Return postcard

CLAIMS AS FILED

Number of Claims Filed	No.	In Excess of	Extra	Rate	=	Fee
Total Claims	53	20	33	25	=	825.00
Independent Claims	6	3	3	100	=	300.00
Multiple Dependent Claims Fee					=	0
Basic Filing Fee					=	150.00
Search Fee					=	250.00
Examination Fee					=	100.00
Utility Application Size Fee		100			=	0
Total					=	1625.00

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

By: 

MERCHANT & GOULD P.C.
 P.O. Box 2903, Minneapolis, MN 55402-0903
 (612) 332-5300

Name: Curtis B. Hamre
 Reg. No.: 29,165
 Initials: CBH/pjk

23552

PATENT TRADEMARK OFFICE

(PTO TRANSMITTAL - NEW FILING)